

ACT Quarterly Report Form

Directions & Definitions

IN THE PAST 3 MONTHS, HOW MANY DAYS AND TIMES HAS THE CLIENT:

- **Been homeless?** Client is in a shelter, mission or living on the streets.
- **Been incarcerated/detained?** Client is incarcerated in a jail or prison. If youth, client is in a juvenile detention center.
- **Been hospitalized for psychiatric reasons?** Client was admitted to an inpatient psychiatric hospital.
- **Been in residential/inpatient treatment for substance use reasons?** Client was admitted to a residential treatment facility or inpatient hospital for substance use treatment.
- **Visited an ER for psychiatric reasons?** Client was triaged by a doctor or nurse in the emergency room for psychiatric health reasons/concerns within the past 3 months.
- **Visited an ER for physical reasons?** Client was triaged by a doctor or nurse in the emergency room for physical health reasons/concerns within the past 3 months.
- **Hospitalized for medical reasons?** Client was admitted to hospital due to medical reasons.
- **Utilized a primary care doctor?** Client attended appointment(s) for routine physical health as preventive measures or on physical health diagnosis within the past 3 months.

IN THE PAST 3 MONTHS, HOW MANY DAYS WAS THE CLIENT COMPETITIVELY EMPLOYED?

Competitive employment has these characteristics:

- They are part-time or full-time jobs that exist in the open labor market;
- They pay at least a minimum wage; and
- They are jobs that anyone could have regardless of disability status.

WAS THE CLIENT COMPETITIVELY EMPLOYED ON THE LAST DAY OF THE REPORTING PERIOD?

Choose yes if the client was in competitive employment, as defined above, on the last day of the reporting period.

WHAT IS THE CLIENT'S STAGE OF SUBSTANCE USE TREATMENT ON THE LAST DAY OF THE QUARTER?

- **N/A**
- **Pre-Engagement:** The client does not have a working alliance with substance use specialist, and meets criteria for substance use or dependence.
- **Engagement:** The client has minimal progress toward a working alliance with substance use specialist, and meets criteria for substance use or dependence.
- **Early Persuasion:** The client has a working alliance with substance use specialist, continues to use the same amount of substances or has reduced substance use for less than 2 weeks, and meets criteria for substance use or dependence.
- **Late Persuasion:** The client has a working alliance with substance use specialist, shows some evidence of reduction in use for the past 2-4 weeks (fewer substances, smaller quantities, or both), but still meets criteria for substance use or dependence.
- **Early Active Treatment:** The client is engaged in treatment and has reduced substance use for more than the past month, but still meets criteria for substance use or dependence.
- **Late Active Treatment:** The client is engaged in treatment and has not met criteria for substance use or dependence for the past 1-5 months.

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- **Relapse Prevention:** The client is engaged in treatment and has not met criteria for substance use or dependence for the past 6-12 months.
- **In Remission or Recovery:** The client has not met criteria for substance use or dependence for more than the past year.

WHAT IS THE CLIENT'S CURRENT LIVING ARRANGEMENT ON THE LAST DAY OF THE QUARTER?

0. **N/A:** Deceased or client's living arrangement is unknown.
1. **Psychiatric Hospital:** Client is admitted for inpatient psychiatric treatment (state facility).
2. **Substance Use Residential/Inpatient Treatment:** Client is admitted for inpatient/residential substance use treatment.
3. **General Hospital Psychiatric Ward:** Client is admitted for inpatient psychiatric treatment (private hospital).
4. **Nursing Home:** Client is admitted into a nursing home.
5. **Adult RCF/Group Home:** Client resides in a residential care facility or group home.
6. **Lives with Relatives/Friends:** Client lives with family or friends; Client does not control, own the home, sign a lease or pay rent; Client is dependent on other persons for care.
7. **Semi Independent Apt.:** Client has his or her own apartment; Housing is agency owned; Housing is contingent on participation in treatment; Staff is available onsite in designated apartment.
8. **Supervised Individual Living:** Client does not choose whom they live with; Housing is agency owned or operated; Housing is contingent on participation in treatment; Housing has live-in or 24 hour staff on an ongoing basis.
9. **Independent Living:** Client chooses with whom he or she lives; Client or guardian owns the home or signs the lease; Housing is not contingent on participation in treatment.
10. **Jail/Prison/Juvenile Detention:** Client is in jail, prison or juvenile detention.
11. **Homeless:** Client is in a shelter, mission or living on the streets. (This does not include couch surfing. List couch surfing under lives with the relative/friends category)
12. **Other (specify):** Any other situation not listed, please specify.
13. **Under 18 Living with Family:** Children/Youth under 18 living with family.
14. **Foster Care/Treatment Family Home:** Children/Youth living temporarily in foster care /DMH treatment family home.
15. **Youth Residential:** Client resides in a youth residential care facility.

WHAT IS THE CLIENT'S CURRENT EDUCATIONAL STATUS ON THE LAST DAY OF THE QUARTER?

0. **Not Currently in Educational Activities:** Client is not in school at this time.
1. **Working on HS Diploma/GED/Adult Basic Education:** Client currently is in high school, Adult Basic Education or working on getting their GED.
2. **Vocational School or Training:** Post high school education (developing a trade).
3. **College Part-Time – 11 credit hours or less:** Client attends 11 credit hours or less.
4. **College Full-Time – 12 credit hours or more:** Client attends 12 credit hours or more.
5. **Adult Continuing Education Noncredit:** Client attends any classes for learning and/or enhancing skills.
6. **Other (specify):** Client attends any other education not included, please specify.
7. **Homebound Education:** Children/Youth receiving education through a home school setting.

CLIENT'S HIGHEST LEVEL OF EDUCATION COMPLETED:

1. **No HS or GED:** Client has not received Diploma or GED.
2. **HS Diploma or GED:** Client received Diploma or GED.
3. **Some College:** Client has attended some college.
4. **Associate's Degree:** Client received an associate's degree.

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5. **Vocational Training Certificate:** Client received training certificate.
6. **BA/BS:** Client received BA/BS degree.
7. **Masters/Ph.D.:** Client received Masters/Ph.D. degree.

TOBACCO USE:

0. **Never Used:** Client has never used tobacco products.
1. **Quit More Than 3 Months Ago:** Client quit more than 3 months ago.
2. **Quit Within Last 3 Months:** Client quit within the last 3 months.
3. **Currently Use:** Client currently uses tobacco products.

TOBACCO CESSATION (Receiving assistance to quit?):

- **Yes:** Choose if client is currently using tobacco products and is receiving assistance to quit.
- **No:** Choose No if client is currently using tobacco products and is not receiving assistance to quit.
- **N/A:** Choose N/A if client has never used; quit more than 3 months ago; or quit within the last 3 months.

LEGAL STATUS ON LAST DAY OF THE QUARTER:

0. **Guardianship:** A legal relationship created when a person or institution is appointed by the court to care for and/or handle the affairs of minor children or incompetent adults.
1. **Conservatorship:** A person or entity appointed by a court to manage the property, daily affairs, and financial affairs of another person, usually someone who is incompetent by reason of a physical or mental infirmity or age.
2. **Payeeship:** A person or entity appointed by a court to manage the financial affairs of another person.
3. **Custody of Biological Parents:** Natural parent(s) of a youth have the right to the care, custody, and control of that youth, and the duty to provide food, clothing, shelter, ordinary medical care, education, treatment and discipline to the youth.
4. **Adopted:** A person assumes the parenting of a youth, from that person's biological or legal parent(s), and, in so doing, permanently transfers all rights and responsibilities, along with filiation, from the biological parent or parents.
5. **Custody of Children's Division:** Youth legally made a ward of the court in the custody of the Department of Social Services, Children's Division. Children's Division assumes all lawful authority to make medical and legal decisions on the youth's behalf.
6. **Adjudicated:** Youth under a court's jurisdiction usually as a result of having engaged in delinquent behavior and not having a legal guardian that could be entrusted with being responsible for him or her.
7. **Independent:** An individual legally able to take care of themselves and handle their own affairs and finances.
8. **Conditional Release:** An order from a court that allows a forensic consumer to reside in the community under certain specified conditions and monitoring.
9. **Other (specify):** Any other situation not listed, please specify.